



Employment Application – Please Print

Name: _____ Date: _____

Social Security Number: _____

Mobile Phone #: _____ Home Phone #: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Email address: _____

Driver's License #: _____ State: _____ Expiration date: _____

Commercial Driver's License (CDL): Yes / No Class: A / B

Referred by: _____

Current or immediate past employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Describe your experience in the tree care or landscape industry: _____

Number of years you have been employed in the tree care or landscape industry: _____

Describe why Shreiner Tree Care should consider hiring you: _____

Requested starting wage: \$_____ per hour Available starting date: _____

Education: High school: _____ Year graduated: _____

College: _____ Year graduated: _____

By signing below, if hired, I will agree to submit to random drug screening, Department of Motor Vehicles check and State Police background check.

I also acknowledge that Shreiner Tree Care is an "at will" employment Company. This means that without regard to any provision in the Employee Handbook, either you or the Company may end the employment relationship at any time, for any reason, with or without cause or notice.

Applicant signature: _____ Date: _____